



Express Mail Mailing Label No.: EV926974370US

TRANSMITTAL FORM

Application Serial Number	10/751,736
Filing Date	January 6, 2004
First Named Inventor	Martinez
Group Art Unit	1642
Examiner Name	Yao, Lei
Attorney Docket No.	WYE-031
Patent No.	Not applicable
Issue Date	Not applicable

ENCLOSURES (check all that apply)

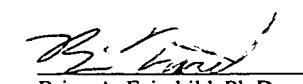
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application <input type="checkbox"/> Formal Drawing(s) <input checked="" type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below) <input checked="" type="checkbox"/> Declaration of Robert Vincent Martinez Under 37 C.F.R. §1.132
<input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]		
<input checked="" type="checkbox"/> Petition for Extension of Time		
<input checked="" type="checkbox"/> Information Disclosure Statement <input checked="" type="checkbox"/> Form PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations B1-B5 and C1-C3		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above		

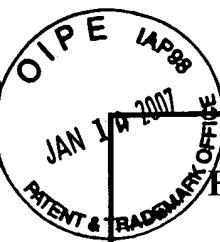
CORRESPONDENCE ADDRESS

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 Kirkpatrick & Lockhart Preston
 Gates Ellis LLP
 State Street Financial Center
 One Lincoln Street
 Boston, MA 02111-2950
 Tel. No.: (617) 261-3100
 Fax No.: (617) 261-3175

SIGNATURE BLOCK

Respectfully submitted,

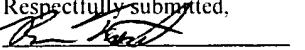
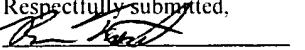
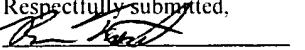
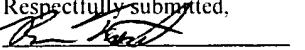
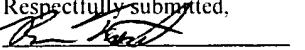
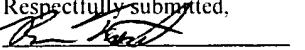

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 Attorney for Applicants
 Kirkpatrick & Lockhart Preston
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**EE TRANSMITTAL
FY 2007**

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100	Design search fee																																																																																																																																																																																																												
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250	Design size fee (each add'l 50 pgs. over 100)																																																																																																																																																																																																												
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Direct all correspondence to:					Respectfully submitted,  Brian A. Fairchild, Ph.D. Attorney for the Applicants Kirkpatrick & Lockhart Preston Gates Ellis LLP State Street Financial Center One Lincoln Street Boston, MA 02111-2950 Tel. No.: (617) 261-3100 Fax No.: (617) 261-3175																																																																																																																																																																																																								